

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

June 08, 2018

Sheriff Nancy Hove Pierce County Sheriff's Department 555 Overlook Dr. Ellsworth, WI 54011

Re: 2018 Annual Jail Inspection

Dear Sheriff Hove,

On April 11, 2018, the annual inspection of the Pierce County Jail was conducted pursuant to WI Statute 301.37(3). The inspection compared the facility and its operation to applicable state statutes and Department of Corrections' Administrative Code Chapter DOC 350. This report summarizes my findings, including the progress made following the 2017 inspection, any statute or administrative code violations, physical plant and maintenance issues, and an overall summary of facility operations. The inspection worksheet is attached to this report and includes detailed inspection results.

On the day of the inspection, there were 34 inmates incarcerated in the facility with 20 individuals on home monitoring.

Progress Following the Previous Inspection

- The new facility was constructed and occupied on October 11, 2017.
- One Sergeant position was added, allowing for one Sergeant to be scheduled on every shift.
- Mental health services were increased from two hours per week to four.
- The jail nurse position increased from 23 hours per week to 40 hours per week.

Goals and Initiatives

- To increase mental health services in the jail from four hours per week to 20 hours per week
- Enhance training opportunities to include specific topics of the month for staff to focus on.

Physical Environment

The Pierce County Jail was constructed in 2017. The jail is a podular design with a total of 8 housing units and one control center. The jail has a maximum rated capacity of 80 beds and is not approved to house juveniles.

Summary of Jail Operations

I met with the administrative, security, healthcare, and foodservice staff to conduct the annual inspection. The site visit included a review of facility records and documentation as well as a walkthrough of the detention areas. The attached checklist details my findings as they relate to the Department of Corrections Administrative Code Chapter DOC 350 and applicable State Statutes.

The Pierce County Jail provides many programs and activities for inmates. The facility provides an exercise room that allows inmates a designated area for recreation.

The jail also has two designated program rooms where inmates participate in multiple programs to include the following:

- Book Club
- Multiple religious programs including Jehovah's Witnesses, Bible study, church services, and other programs as requested.
- Library services
- 31 day Life Skills
- Women's support groups
- NAMI (National Alliance on Mental Illness)
- Educational programs to include GED study and testing.

In summary, the overall appearance of the jail was in very good condition. The facility was clean, and no sign of major wear was apparent. After a walkthrough of the detention areas, there were no repetitive complaints from inmates regarding conditions of confinement or staff supervision. The staff is to be commended for the overall positive climate and their observed professional interaction with inmates.

Violations

The following violations were documented during this inspection:

• 350.12(13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly. - A review of facility documents shows not all areas of the facility were inspected in the month of March.

Approval

The Pierce County Jail is approved by the Department of Corrections for the secure detention of adult offenders with the maximum capacity of 80. This approval is contingent on the continued compliance with all applicable state statutes and administrative codes.

I wish to thank Jail Administrator Albarado and his staff for their assistance, courtesy and professionalism during my inspection. Their efforts are greatly appreciated.

If you have any questions regarding the inspection results summarized in this letter and found in the inspection worksheet document attached or if I may be of any assistance regarding correctional matters, please contact me.

Sincerely,

Brad Hoover

Detention Facilities Specialist

cc: Steve Albarado-Jail Administrator

Kristi Dietz, Director-ODF

File

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY:	Pierce		I	DA	TE: 04/11/18		
	IN	IM/	ATE HOUSING AND CLASSIFICATION	ON			
DOC 350.05	(3) (d) In jails that are construct	ted	or substantially remodeled on or after Sept	ten	nber 1, 2014, double cells shall have a		
floor area of	at least 25 square feet of unenc	um	bered space per occupant.				
COMPLIANC	;E \	/ER	IFICATION	_			
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Comments:	The Pierce County Jail was o	con	structed in 2017.				
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			are constructed or substantially remodeled				
			of at least 70 square feet. NOTE: ODF red 990, a cell shall have a floor area of at least				
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Comments: I	NA-The Pierce County Jail w	/as	built in 2017.				
DOC 350.20	Double celling. If approved by	the	department, the jail shall have policies an	d p	procedures relating to double celling.		
			nall determine jointly the adequate staffing				
			d security of the jail staff and inmates whe				
			d by the representatives of the county boa all remain in effect until rescinded or amen				
			uate staff as agreed upon by the county bo				
occur.		·	, , ,		, ,		
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The The	County Board and Sheriff agree to	boa a the	rd and Sheriff is on file with the departmer	it a	ind contains the following elements:		
			ealth care staff, support and service staff and	adı	ministrative staff		
■ The	staffing pattern is detailed in the w	vritte	en agreement				
• The	agreement is signed by represent	ativ	es of the County Board and the Sheriff				
COMPLIANC	`E \	/ED	IFICATION				
	eets standard		Policy and procedure manual review	\neg	Previous compliance documented		
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Comments:	There is a staffing agreemen	it o	n tile.				

DO	C-2744 (4/2015)					
	350.20 (2) Inmates housed in er s. 302.36, Stats.	n the same ce	II shall have the same custody classific	cation and be properly segregated as required		
COM	/PLIANCE	VER	RIFICATION			
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector			
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Com	ments: Policy #1100.9. Th	e Pierce Co	unty Jail has a policy in place rega	arding double celling. A review of facility		
			d according to their classification.	,		
				l's total number of cells, whichever is greater,		
	I be maintained for single occ		reas, at least one cell of 13 % of the jair	s total number of cens, whichever is greater,		
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Com	ments: Policy #1100.9.					
Com	mierio. I olicy II I roc.e.					
DOC	350.20 (4) Receiving cells m	ay not be use	d for double occupancy.			
COM	/PLIANCE	VER	RIFICATION			
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Com	ments: Policy #1100.9. Re	ceiving cells	s are used for single occupancy on	nly.		
main eligil have	ntain an objective prisoner cla bility criteria for prisoner part e policies and procedures rela 350.21 (1) Description of the	essification sy icipation in a iting to classi	stem to determine prisoner custody stavailable work assignments, programs a fication.	. 302.36 Stats. The sheriff shall establish and tatus and housing assignment, and develop and community service projects. The jail shall the identification and training of staff authorizer appeal process.		
	350.21 (2) Eligibility criteria 350.21 (3) Review of prisone		_	ents, programs and community service projec		
	 The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. 					
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Com		acility has a	• • •	arding the classification of inmates. The		
				s also includes a secondary review of all		

classifications and appeals.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:
(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

DOC 3		,	ino onecanagea to complete priyeleal inopet	 In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit. 							
	50.18 (2) Supplemental observations.	ation. A v	ideo monitoring system may be used to	sup	plement but not replace personal						
		h - h	to a shall be decomposed								
	50.18 (3) Documentation. Eac		IFICATION								
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	•	•	cedures in place regarding security								
comp	liance regarding observation	m checks	. Intercom and radios all appeared	lo L	e in working order.						
			he system for physically counting inmate minimum of one count per shift.	tes.	Formal counts shall be completed and						
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Not reviewed Verbal confirmation by facility staff											
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	•		re conducted three times per day. ons of procedures for conducting and d	locur	nenting facility and area searches.						
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		onthly inspections shall be made to determin king order. Each inspection shall be docum	ne if all jail doors and locks within and to the nented.
 All manufa 		d locks are all operable. ses are repaired in a timely manner. operating all locks, doors and releases.	
COMPLIANCE	VEF	RIFICATION	
Meets sta	andard	Policy and procedure manual review	Previous compliance documented
Needs im	nprovement $\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
Non-com	pliant	Sight confirmation by inspector	
Not revie	wed	Verbal confirmation by facility staff	
	#222.2.5. The facility had documents indicates cor	as a policy and procedure in place regan mpliance.	rding door and lock inspections. A
(a) All issued I (b) All keys sh (c) Inmate are	keys shall be inventoried and a sall be stored in a secure area and not permitted to handle or utili	and accessible in the event of an emergency ize jail keys.	
COMPLIANCE		RIFICATION	
Meets sta		Policy and procedure manual review	Previous compliance documented
	nprovement	Sample of facility records reviewed	Other (specify):
Non-com	_	Sight confirmation by inspector	
Not revie	wed	Verbal confirmation by facility staff	
		n, availability, control, inventory, storage and urity devices and specification of the level of	I use of firearms, chemical agents, fauthority required for their access and use.
COMPLIANCE	VEF	RIFICATION	
Meets sta	andard X	Policy and procedure manual review	Previous compliance documented
Needs im	nprovement	Sample of facility records reviewed	Other (specify):
Non-com	pliant	Sight confirmation by inspector	
Not revie	wed	Verbal confirmation by facility staff	
control devices.	Firearms are not allowed	policy and procedure in place regardin d in the secure perimeter of the jail. Sign	gns are posted as well.
the facility.	ools and sharps control. Intaction of the control and invento	roduction, availability, control, inventory, stoory is maintained	orage and use of tools and sharps within
COMPLIANCE	VEF	RIFICATION	
Meets sta		Policy and procedure manual review	Previous compliance documented
	nprovement	Sample of facility records reviewed	Other (specify):
Non-com	· <u> </u>	Sight confirmation by inspector	
Not revie		Verbal confirmation by facility staff	
Comments: Policy		•	

DOC-2744 (4/2015)

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- a) Local fire department inspection requirements under sub. (5).
- b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- rraining of staff in equipment use and the evacuation of inmates
 - Staff training is documented.

 d) A written evacuation plan Jail staff can articulate or demonstrate the evacuation routes and policies of the jail. 						
COMPLIANCE VERIFICATION						
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
Needs improvement		Sample of facility records reviewed		Other (specify):		
Non-compliant		Sight confirmation by inspector				
Not reviewed		Verbal confirmation by facility staff				
Comments: Policy #402. A policy and pr	roc	edure is in place regarding fire safety.				
DOC 350.19 (3) The evacuation route developlace for jail staff in the jail.	ope	d as part of the evacuation plan under sub.	. (2)	(d) shall be posted in a conspicuous		
COMPLIANCE	√EF	RIFICATION				
Meets standard		Policy and procedure manual review		Previous compliance documented		
Needs improvement		Sample of facility records reviewed		Other (specify):		
Non-compliant	\boxtimes	Sight confirmation by inspector				
Not reviewed		Verbal confirmation by facility staff				
DOC 350.19 (4) Fire safety evacuation and o months. Each practice or simulation shall b			ed	by all jail staff at least once every 12		
•		RIFICATION				
Meets standard	$\frac{1}{N}$	Policy and procedure manual review	\Box	Previous compliance documented		
Needs improvement	Ħ	Sample of facility records reviewed	\exists	Other (specify):		
Non-compliant	Ħ	Sight confirmation by inspector		сто (ороспу).		
	$\overline{\boxtimes}$	Verbal confirmation by facility staff				
Comments: Policy #402.6. Training was		· · · · · · · · · · · · · · · · · · ·				
DOC 350.19 (5) The facility shall be inspected by the local fire department at least once every 12 months and a record thereof shall be maintained.						
		at the facility conforms to applicable fire safety	/ CO	des.		
	/EF	RIFICATION				
Meets standard	$\underline{\sqcup}$	Policy and procedure manual review		Previous compliance documented		
	\boxtimes	Sample of facility records reviewed		Other (specify):		
Non-compliant		Sight confirmation by inspector				
Not reviewed	\boxtimes	Verbal confirmation by facility staff				
Comments: The facility was inspected on	n J	une 7, 2017 with no violations noted.	Th	e facility is aware of the timeframe		

requirements for the inspection of 2018.

DOC 350.19 (6) There shall be monthly insp Inspections shall be documented.	ecti	ons of the facility to ensure compliance wi	th safety and fire prevention standards.
COMPLIANCE	VER	IFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Comments: Policy #402.7. A review of fa	acil	ity records indicates compliance.	
prevent death or bodily injury to the staff me inmate from the jail. Staff may use only the Corporal punishment of inmates is forbidde	force emb ame	e against an inmate only if force is necessa er, the inmate or someone else, unlawful d ount of force reasonably necessary to achi	ary to change the location of an inmate or to lamage to property, or the escape of an
	VER	IFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments: Policy #511. The facility has reports were reviewed. DOC 350.22 (2) Any staff member who has administrator or the staff member's supervisus behitted by the end of the shift, unless other staff.	use sor	d force to control an inmate or inmates sha describing the incident. The report shall in	all submit a written report to the sheriff, jail notude all known relevant facts and be
 Supervisory review is conducted a 	and	·	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement	\Box	Sample of facility records reviewed	Other (specify):
Non-compliant	Ħ	Sight confirmation by inspector	
Not reviewed	Ħ	Verbal confirmation by facility staff	
Comments: Policy #511.6.		, ,	
	use ocum	d as punishment and are not applied longeneted. y restrained for non-routine purposes, a wr	
 Supervisory review is conducted a 			
		IFICATION	
Meets standard	$\underline{\boxtimes}$	Policy and procedure manual review	Previous compliance documented
Needs improvement	<u>Ц</u>	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments: Policy #509.			

DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate is notified of right to appeal and appeal procedure
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(a) COMPLI	•	•	classification following the imposition of disc RIFICATION	cipline.		
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):		
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
Comments: Policy #600. The facility has a policy and procedure in place regarding inmate discipline.						

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.

	 The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions. The identity of the person completing the health screening form is documented. 						
COMPLIANCE			RIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
	ening forms indicates compliand		olicies and procedures in place regard				
comp	350.13 (5) A health appraisal that is leted by health care staff within the protocols established by the respon	previo	completed within 14 days after arrival at thous 90 days. The health appraisal shall be oblysician.	e fa cor	acility unless a health appraisal has been mpleted by health care staff in accordance		
COM	PLIANCE	VER	RIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
Comments: Policy #720.5. Health appraisals are completed within the 14 day timeframe.							
	350.14 Inmate health care. There soces in a confidential manner.	hall be	e sufficient equipment, material, space and	su	pplies for the performance of health care		
COMI	DMPLIANCE VERIFICATION						
\times	Meets standard		Policy and procedure manual review	\Box	Previous compliance documented		
	ivieets standard		Policy and procedure manual review	Ш	Previous compliance documented		

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant

Not reviewed

Comments:

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody. Jail provides a specific form for inmates to request medical assessment or treatment. All inmate requests for medical care are reviewed by health care staff. The dispositions of the inmate medical requests are documented by health care staff members. **VERIFICATION** COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A medical nurse is hired through the county and is on site M-F @40hrs per week, and an on call procedure is in place for weekends. Emergency medical is provided by the local hospital, and dental is provided by a community dental provider. Mental health treatment is provided by two county mental health providers. They each are on site two hours per week for a total of four hours onsite. DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A review of licenses indicates compliance in this area. DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws. Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Medical records are stored in a confidential manner. DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #311.3. A spot check of records indicate training was completed last year in September. DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care. DOC 350.15 (1) Documentation of health referrals made or health care provided. DOC 350.15 (2) Maintenance of documents in an inmate's confidential file. **COMPLIANCE** VERIFICATION

Policy and procedure manual review

Meets standard

Previous compliance documented

Off	fice	RTMENT OF CORRECTIONS of Detention Facilities 2744 (4/2015)				WISCONSIN
Ī		Needs improvement	\boxtimes	Sample of facility records reviewed	\Box	Other (specify):
Ī	ī	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		
Ī	┪	Not reviewed	冈	Verbal confirmation by facility staff		
		ents: The facility has policies and tes compliance in this area.	pro	ocedures in place regarding inmate he	alt	th care. A sample of facility records
		50.15 (3) Names, addresses and telepency and routine health care services Contact information is available to staff	foi	ne numbers of health care providers or age r inmates.	∍no	cies who have agreed to provide
CON	ИPL	IANCE \	/EF	RIFICATION		
	$\overline{\mathbf{X}}$	Meets standard	\boxtimes	Policy and procedure manual review	\Box	Previous compliance documented
Ī	\exists	Needs improvement	$\overline{\Box}$	Sample of facility records reviewed	Ħ	Other (specify):
<u> </u>	┪	Non-compliant	一	Sight confirmation by inspector	<u> </u>	Garier (epochy).
Ī	┪	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff	_	
Con	nme	ents: Policy #701.5.		vorsal communation by racinty clair		
DOC	35	Health care referrals are made and do Staff are knowledgeable about the health	cur		vid	e health care.
CON	ИPI			RIFICATION		
		Meets standard		Policy and procedure manual review	$\overline{}$	Previous compliance documented
<u> </u>			$ herefore = \frac{1}{2} herefore =$	Sample of facility records reviewed	屵	
<u> </u>	┽	Needs improvement	믐		Ш	Other (specify):
	┽	Non-compliant Not reviewed		Sight confirmation by inspector Verbal confirmation by facility staff		
DOC	cula C 35	ate the process of inmate referra	ve a	policy and procedure in place regarding authority to make health care decisions, including the use of an inmate's personal ph	clu	ding emergency medical and dental care.
			-			
		LIANCE \		RIFICATION	_	
	<u> </u>	Meets standard	\boxtimes	Policy and procedure manual review	Ш	Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
pro	cec		me	nrough the county and is onsite M-F @ ergency medical is provided by the loc request outside medical care.		
DOC	35	list, or other appropriate means.	dica			ook, posted notice, inmate rule and regulation able to read or write.
CON	ИPL	LIANCE \	/EF	RIFICATION		
	X	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
		Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		
		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		

Comments: Policy #702. Inmates can request medical attention through the kiosk on the housing units.

DO	350	0.15 (8) Provision for inmates with o	hrc	onic medical conditions.			
CON	ИРLI	ANCE \	/ER				
	\overline{X}	Meets standard	X	Policy and procedure manual review		Previous compliance documented	
Ī		Needs improvement	同	Sample of facility records reviewed	Ħ	Other (specify):	
Ī		Non-compliant	靣	Sight confirmation by inspector		(1 7)	
Ī		Not reviewed	百	Verbal confirmation by facility staff			
Con	men	ts: Policy #727 The facility has	<u> </u>	policy and procedure in place to handl	le i	inmates with chronic medical	
	ditic		<i>.</i>	pondy and procedure in place to hand.			
DOC	350	0.15 (9) Procedure for processing in	ma	te medical requests on a daily basis.			
		Inmate medical requests are documer	nted				
CON				RIFICATION			
					\neg	Draviava compliance decompated	
<u> </u>	<u> </u>	Meets standard	$\frac{\square}{\square}$	Policy and procedure manual review	4	Previous compliance documented	
<u></u> _	_	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):	
	4	Non-compliant		Sight confirmation by inspector			
L		Not reviewed	\boxtimes	Verbal confirmation by facility staff			
Con	nmen	ts: Policy #702. Medical reques	sts	are processed daily.			
	udin	g emergency services.		's confidential medical file of any referral			
CON	/IPLI	ANCE \	/ER	RIFICATION			
	\overline{X}	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
Γ		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff			
Con	nmen	ts: Policy #702. A review of sar	np	e medical records indicates compliand	ce.		
DOG	 DOC 350.15 (11) Provision of special diet if ordered by a qualified health care professional. Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file. The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional. 						
CON	/IPLI	ANCE \	/ER	RIFICATION			
	\leq	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed	\boxtimes	Verbal confirmation by facility staff			
		•		are approved through the nurse and chation on a need-to-know basis.	oob	cumented in the inmate's confidential	
DO	350	0.15 (12) Pregnancy management.					
		ANCE	/ER	RIFICATION			
	\times	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed		Verbal confirmation by facility staff			

Office of Detention Facilities DOC-2744 (4/2015)

Comments: Policy #705.				
DOC 350.15 (13) Maintenance of agree	ements be	etween the jail and providers of health c	are s	services.
COMPLIANCE	VER	RIFICATION		
Meets standard	\square	Policy and procedure manual review		Previous compliance documented
Needs improvement		Sample of facility records reviewed		Other (specify):
Non-compliant		Sight confirmation by inspector		
Not reviewed	$ \vdash$	Verbal confirmation by facility staff		
Comments: Policy #725.3	<u></u>	voidal dominimation by fadility diam		
to the department or another county' to the receiving institution intake staff (b) If the jail does not have medical staff possible and provide it to the receiving within 24 hours after the transfer. 1. The jail medical staff, the prison under contract with the jail revie 2. The medical staff or health care information. 3. The medical staff or health care quickest available means to the (bm) Jail medical staff need not complete the receiving institution intake staff (f) Receiving institution intake staff may in the prison's or jail's medical staff 2. A prisoner's healthcare provider 3. In the case of a prison or jail that the department or the jailer to re	ailer a stars jail. Except fat the time on duty and institution of the format the format the time make a heff.	ical records. Indardized form for recording the medical concept as provided in pars. (b) and (bm), jail range of each such transfer. It the time of a transfer, the jailer or his or have the time of a transfer, the jailer or his or have the time of the transfer. In care provider or, if the prisoner does not have provided to the receiving institution at the reviewing the form corrects any errors in the reviewing the form transmits the updated for institution intake staff. If the jailer or his or her designee provides the of the transfer. The provided to the receiving institution at the reviewing the form transmits the updated for institution intake staff. If the jailer or his or her designee provides the of the transfer. The provided to the receiving institution at the provided that the provided the provided that the provided t	mediconer de Fhe ja nave e timo e form o a copfollow	n and includes in it any additional available r the information included on the form by the by of the prisoner's complete medical file to ving: ansfer, a health care provider designated by
COMPLIANCE	VER	RIFICATION		
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
Non-compliant		Sight confirmation by inspector		
Not reviewed		Verbal confirmation by facility staff		
this form.		cords were reviewed and indicate of		oliance when completing and using es relating to communicable disease and
(b) Documentation of the need for ise(c) Provision of laboratory screening	vision of in plation or for inmate ous waste	nmates during isolation or quarantine unde quarantine under s. 252.06(6)(b), Stats., in	the i	nmate's confidential medical file. able disease if ordered by medical personnel.
	<u></u>	2		
Comments: Policy #728.				

Office of Detention Facilities DOC-2744 (4/2015)

	DOC-2744 (4/2015)						
DOC 350.15 (16) Detoxification and management of intoxicated inmates.							
	Appropriate housing and supervision is provided.						
			_	IFICATION	_		
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement	Щ	Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed		Verbal confirmation by facility staff			
Cor	nme	ents: Policy #730.					
		50.16 Control and administration of ministration of prescription and non-			d b	rocedures relating to the control, delivery	
			-	onal shall prescribe medications and order	r tr	reatments.	
				RIFICATION			
	$\overline{\mathbb{Z}}$	Meets standard	$\overline{\boxtimes}$	Policy and procedure manual review	П	Previous compliance documented	
	<u>4</u>	Needs improvement	$\frac{\square}{\square}$	Sample of facility records reviewed	믐	Other (specify):	
	╡	Non-compliant	$\frac{\square}{\square}$	Sight confirmation by inspector	Ш	Other (specify).	
	╡	Not reviewed	$\frac{\square}{\square}$	Verbal confirmation by facility staff			
	<u> </u>			· · ·		the control and education that of	
		•		policy and procedure in place regarding	ng	the control and administration of	
me	aic	ations. Medications and treatme	ents	are prescribed by a QHCP.			
		50.16 (2) Designated trained staff i ented training shall be provided to ja			of	medication at prescribed times. Annual	
СО	MPL	IANCE \	/ER	IFICATION			
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Ħ	Needs improvement	Ħ	Sample of facility records reviewed		Other (specify):	
		Non-compliant	Ħ	Sight confirmation by inspector		c inter (cpcciny).	
	=		X	Verbal confirmation by facility staff			
Cor	<u> </u>			e nurse issues medication when onsite	۵ '	Security staff are trained to deliver	
		ations if needed.	1110	Thirse issues inculcation when onsite	.	occurry stail are trailied to deliver	
		ary.	te p	personnel that all medications prought in b	у	nmates or other persons for an inmate are	
	.000	ury.					
	•	Verification of prescription medication	is p	erformed by a health care provider or an appr	opi	riately trained designee.	
СО	MPL	IANCE \	/EF	IFICATION			
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Ħ	Needs improvement	Ħ	Sample of facility records reviewed	$\overline{\Box}$	Other (specify):	
	Ħ	Non-compliant	Ħ	Sight confirmation by inspector		c inter (cpcciny).	
	┪	Not reviewed	岗	Verbal confirmation by facility staff			
Car			<u> </u>	s a policy and procedure in place for t	the	a varification and approval of all	
		e medications.	Па	s a policy and procedure in place for i	uie	e verification and approval of all	
D.C.	o o o	50.40 (4) All madia-ti		a iail aball ba impantariad and ulass !!			
טט	C 35	00.16 (4) All medications brought into) tn	e jail shall be inventoried and placed in sec	cur	e storage.	
DO	C 35	50.16 (5) Any medications kept at the	jai	shall be stored in a locked drug cabinet th	nat	is not accessible to inmates.	
			-				
	•	The storage of inmate medications ma					
		Medications that require refrigeration a locked container stored in a refrigerator		kept in a separate, medical refrigerator, unless	s th	ne medications are secured in a separate,	
			_	RIFICATION			
	<u> </u>	Meets standard	$\underline{\boxtimes}$	Policy and procedure manual review	Щ	Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	

Offic	PARTMENT OF CORRECTIONS ce of Detention Facilities C-2744 (4/2015)		WISCONSIN
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	
	ments: Policy #720.3.2. All medicatessible to inmates.	ions are stored in	not
DOC	. ,	f prescription and nonprescription medications edications are listed in the current policy and procedure.	
СОМ	IPLIANCE \	/ERIFICATION	
$\overline{\mathbb{R}}$	Meets standard	Policy and procedure manual review	Previous compliance documented
	Needs improvement	Sample of facility records reviewed	Other (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	
	ments: Policy #715.5. The facility h	as a policy and procedure in place for the	administration and delivery of
who	 administered or delivered the medication 350.16 (8) All refusals of recommenderessional shall monitor the inmate in accessional shall monito	ed health care professional, the full (not abbreviated istration or delivery, and any special instructions or livery records are reviewed by the health care provided to the control of th	be documented. A health care d) name of the medication, the dosage and comments are documented for each der and/or jail administrator or designee for
COM	IPLIANCE \	/ERIFICATION	
	Meets standard	Policy and procedure manual review	Previous compliance documented
	·	Sample of facility records reviewed	Other (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	
who med	prescribed the inmate medication. lication.	MARS showed only partial compliance, a All medications listed in the MARS shall	
	 The return of an inmate's medication i Unused medication is disposed of by a Established protocols regarding the di 	nused medications upon the inmate's release or	or returned to a pharmacy. resence, are followed.
СОМ	IPLIANCE \	/ERIFICATION	
$\overline{\Sigma}$	Meets standard	Policy and procedure manual review	Previous compliance documented
	Needs improvement	Sample of facility records reviewed	Other (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	
	ments: Policy #715.4. Medications umented along with a witness that	are disposed of properly. All medication t is present.	hat is returned or disposed of is

		50.17 Suicide prevention. The jail sheat risk of seriously injuring themselv			ne supervision and housing of inmates who
CO	MPL	LIANCE \	/ER	IFICATION	
	\times	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed		Verbal confirmation by facility staff	
DOC	ate	es who may be at risk of seriously	y in		o the supervision and housing of agency to assess an inmate's potential for
			/FR	IFICATION	
	\overline{X}	Meets standard		Policy and procedure manual review	Previous compliance documented
	4	Needs improvement	$\overline{\mathbb{X}}$	Sample of facility records reviewed	-
	┽	Non-compliant		Sight confirmation by inspector	Other (specify):
	┽	Not reviewed	$\frac{\square}{\square}$	Verbal confirmation by fracility staff	
Con				ords indicates compliance in this area.	
		Medical or mental health care professi A secondary security review of intake assignments, appropriateness of class LIANCE Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #720.3.1. A review of ate on suicide watch shall include all Immediate notification to designated so Designation of housing areas and secu	ona scre iffica /ER /EX /E the an of t		indicated. bility, consistency, appropriateness of housing Previous compliance documented Other (specify): liance. de risk. icide watch.
CON	MPL			IFICATION	
	X	Meets standard	X	Policy and procedure manual review	Previous compliance documented
Ī	Ī	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
Ī	Ħ	Non-compliant	$\overline{\square}$	Sight confirmation by inspector	= (- //
Ī	┪	Not reviewed	Ħ	Verbal confirmation by facility staff	
wat	tch			a policy and procedure in place for the	·
CO	MPL	LIANCE	/ER	IFICATION	
	\overline{X}	Meets standard	X	Policy and procedure manual review	Previous compliance documented
	7	Needs improvement		Sample of facility records reviewed	Other (specify):
	╡	Non-compliant	\exists	Sight confirmation by inspector	
ᆉ	Ħ	Not reviewed	\exists	Verbal confirmation by facility staff	

Comments: Policy #707.3. Mental health provides on-site assessments along with Northwest Connections which provides a secondary service if needed.

			I health professionals within 12 hours of patal health professional shall be completed a		cement of a potentially suicidal inmate on soon as practicable.	
	Recommendations and decisions from	qu	alified mental health professional are docume	nte	ed and maintained at the jail.	
COMP	LIANCE	/EF	RIFICATION			
\boxtimes	Meets standard	X	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed	一	Other (specify):	
一一	Non-compliant		Sight confirmation by inspector	<u> </u>	Guier (opeany).	
Ħ	Not reviewed Verbal confirmation by facility staff					
Comm	ents: Policy #707.6.	<u> </u>				
	350.17 (6) Identification of qualified material after an on-site face-to-face assessment		· · · · · · · · · · · · · · · · · · ·	d t	to remove an inmate from a suicide watch	
COMP	LIANCE	/EF	RIFICATION			
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff			
Comm	ents: Policy #707.3. The county n	ner	ntal health provider assesses and rem	OV	ves inmates from suicide watch.	
• COMP	involved, summary of content of discus	ssic	inistration, and medical/mental health care proon, and actions taken.	ovic	ders is documented, including names of those	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Needs improvement	П	Sample of facility records reviewed		Other (specify):	
	Non-compliant	同	Sight confirmation by inspector			
同	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff			
Comm	ents: Policy #707.6.		, ,			
:	Staff demonstrate a working knowledg Staff are familiar with the location and Staff received training on emergency r The actions taken in response to a sui	e o effe esp cide	apparent suicide attempt, including life-surf first aid and emergency response measures. ective use of emergency response equipment. Honse, including use of emergency response earling progress or suicide threat are documented RIFICATION	:qui		
	Meets standard		Policy and procedure manual review	\Box	Previous compliance documented	
$- \stackrel{owndown}{\vdash}$		$\frac{\square}{\square}$	•	<u>H</u>	•	
- 	Needs improvement	片	Sample of facility records reviewed	Ш	Other (specify):	
- - 	Non-compliant	片	Sight confirmation by inspector			
Comm	Not reviewed ents: Policy #707.6.1.	<u> </u>	Verbal confirmation by facility staff			

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #707.6.2 DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following: (a) Individual initiating the suicide watch. (b) Date and time watch was initiated. (c) Reason watch was initiated. (d) Name of supervisor contacted. (e) Date and time supervisor contacted. (f) Name, date, and time of referral to mental health professional. (g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time. Supervisory review of the relevant documentation is completed. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #707.6.3. A review of facility documents indicates compliance in this area. DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk factors. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #707.4. Staff receives two hours of annual training.

DOC 350.17 (12) Access by staff to debriefing and support services.							
COMPLIANCE			RIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
Commen	Comments: Policy #707.7.1.						

DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt.

WISCONSIN

		2744 (4/2015)			
CC	MPL	IANCE	VEF	RIFICATION	
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	_
		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff	
Со	mme	ents: Policy #707.6.2.			
of po	an i licie: OC 3	nmate in his or her cell or other de s and procedures outlining the admi	esig nist	s section, "administrative confinement" meanted area to ensure personal safety and strative confinement process. dministrative confinement if the inmate's co	security within the jail. The jail shall have
	(b)	Presents a substantial risk of physical Threatens the security and order of the Inhibits a pending disciplinary investigation	jail		
CC	MPL	IANCE	VEF	RIFICATION	
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Ħ	Needs improvement	Ħ	Sample of facility records reviewed	Other (specify):
	$\overline{\sqcap}$	Non-compliant	$\overline{\sqcap}$	Sight confirmation by inspector	
		Not reviewed		Verbal confirmation by facility staff	
Со	mme	ents: Policy #514. There were no	ad	ministrative confinement placement rec	ords for review.
pla	cem	ent decision within 24 hours. This re	evie	Inmate in administrative confinement. The sew shall include evaluation of inmate's classic RIFICATION Policy and procedure manual review	fication. Previous compliance documented
	Ħ	Needs improvement	Ħ	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed		Verbal confirmation by facility staff	
DC	OC 3			istrative confinement shall be reviewed by a	
rel	ease	ed to the general population. Each re	evie		
	\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed		Verbal confirmation by facility staff	
Со	mme	ents: Policy #514.			

DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in							
administrative confinement shall be documented in the inmate's file.							
 The inmate is informed of the reasons 	 The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement. 						
COMPLIANCE VERIFICATION							
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented			
Needs improvement		Sample of facility records reviewed		Other (specify):			
Non-compliant		Sight confirmation by inspector					
Not reviewed		Verbal confirmation by facility staff					
Comments: Policy #514.							
*							
		RECORDS AND REPORTING					
DOC 350.10 Records and reporting.							
DOC 350.10 (1) Register of inmates. Each							
each inmate, including name, residence, a release and releasing authority. If an inmat							
			•				
	VEI	RIFICATION	_				
Meets standard		Policy and procedure manual review	<u> </u>	Previous compliance documented			
Needs improvement		Sample of facility records reviewed	Ш	Other (specify):			
Non-compliant	\boxtimes	Sight confirmation by inspector					
Not reviewed	\boxtimes	Verbal confirmation by facility staff					
Comments: Records and inmate registe	er a	e kept on the computer.					
DOC 350.10 (2) Storage of records. Record							
and shall be maintained in a confidential ma	nann	er in accordance with s. 938.396, Stats., an	d a	ny other applicable federal or state law.			
COMPLIANCE	VEI	RIFICATION					
Meets standard		Policy and procedure manual review		Previous compliance documented			
Needs improvement		Sample of facility records reviewed		Other (specify):			
Non-compliant	X	Sight confirmation by inspector					
Not reviewed		Verbal confirmation by facility staff					
Comments: Records are stored in a con	nfide	ential manner. No iuvenile records are	g e	resent, as the Pierce County Jail is			
not approved to house juveniles.			- 12				

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

COMPLIANCE		VERIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Commer	nts:			
DOC 350	0.12 Sanitation and Hygiene. The ja	ail sh	all have policies and procedures relating to	o sanitation and hygiene.
DOC 350	0.12 (1) Facilities are required to be	e clea	an and in good repair.	
COMPLI	ANCE	VER	IFICATION	
			-	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Meets standard Needs improvement		Policy and procedure manual review Sample of facility records reviewed	Other (specify):
			•	_
	Needs improvement		Sample of facility records reviewed	_
Commer	Needs improvement Non-compliant Not reviewed		Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	Other (specify):
Commer	Needs improvement Non-compliant Not reviewed		Sample of facility records reviewed Sight confirmation by inspector	Other (specify):
Commer	Needs improvement Non-compliant Not reviewed		Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	Other (specify):

DOC	350.12 (2) Blankets shall be lau	ndered mo	onthly and before reissue.				
D00	250.42 (2) Chasta millousessa			al a4 la.	ant wealth, and bafare release		
DOC	350.12 (3) Sneets, pillowcases	and mattre	ess covers shall be changed and washed	a at lea	ast weekly and before reissue.		
DOC	350.12 (4) Clean towels shall be	e issued to	each inmate twice a week.				
COM	PLIANCE	VEF	RIFICATION				
\times	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·		
	☐ Not reviewed ☐ Verbal confirmation by facility staff						
Comr	ments: Policy #807. The facil	ity has a	policy and procedure in place. On	the d	lay of inspection, inmates also stated		
	they are getting their laundry	•					
DOC	350 12 (5) Mattresses shall be	nrovided	where there is a need for overnight de	tentior	n. Each mattress and each pillow, if used,		
					pillows shall be kept in good repair and in		
					be cleaned and sanitized before reissue.		
DOC	250 12 (6) Suppliers of mattross	oc and nil	lows shall be provide evidence to the sh	oriff t	hat the products are fire retardant		
	rproof, and easy to clean.	es and pii	lows shall be provide evidence to the si	ieiiii ti	mat the products are the retardant,		
DOC	350.12 (7) Mattresses shall be of	of proper s	ize to fit the bed.				
СОМ	PLIANCE	VEF	RIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector				
	Not reviewed		Verbal confirmation by facility staff				
Comr	ments: Policy #807. Mattress	es are pr	ovided for overnight detention and	appe	ar to be of proper size.		
				-11			
DOC	250.12 (9) The shariff shall pr	ovido an	inmata whose clothing has been confi	coatod	I with adequate and appropriate clothing,		
			in custody. Footwear shall be cleaned a				
	PLIANCE	VEF	RIFICATION				
\succeq		$\underline{\hspace{1cm}}$	Policy and procedure manual review	<u>_</u>	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant		Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
	•	is issued	I to all inmates who are housed in $\mathfrak g$	gener	al population. All footwear is cleaned		
and	sanitized before reissue.						
DOC	350 12 (9) Laundry schedule sk	all he esta	ablished to meet daily needs All issued	d and a	allowed clothing items are laundered twice		
week		ian be est	ibilished to ineet daily needs. All issued	a ana c	anowed clothing hems are laundered twice		
	PLIANCE		RIFICATION				
\succeq			Policy and procedure manual review	<u> </u> _	Previous compliance documented		
<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):		
<u>L</u>	Non-compliant	<u> </u>	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
			is a procedure in place to meet laui	ndry r	needs. On the day of inspection,		
inma	ates stated their laundry is w	ashed tw	rice weekly.		-		

for (exte	erminating rodents or insec	ts shall be		or ea	Containers of poisonous compounds used asy identification of contents. Poisonous cked area not accessible to inmates.
CON	1PL	IANCE	VER	IFICATION		
	<u>√</u>	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	1	Needs improvement	$\overline{\mathbb{X}}$	Sample of facility records reviewed		Other (specify):
	Ī	Non-compliant		Sight confirmation by inspector	<u> </u>	- (;),
		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
with	G 35	uardian Pest Solutions wa 0.12 (11) After 24 hours, inm	as reviewe	ed. De provided with towels and toilet article	s su	g pest control. A copy of the contract
	rov	ided to inmates upon reques				materials for females and toilet paper shall os, shaving materials or feminine hygiene
COM	1PL	IANCE	VER	IFICATION		
		Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant	\boxtimes	Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Hyg	ier	ne packages are issued to	all inmat	a policy and procedure in place reg es who are being housed in genera materials daily. Tables used for common	l po _l	
trap	s us	sed for passing meals or other	er items sha	all be kept sanitized.	J U.	So and mode on an action to the commission of th
		IANCE		IFICATION		1
	<u> </u>	Meets standard		Policy and procedure manual review		Previous compliance documented
	┽	Needs improvement		Sample of facility records reviewed	\succeq	Other (specify):
	┽	Non-compliant Not reviewed		Sight confirmation by inspector Verbal confirmation by facility staff		
they	/ re	nts: Policy #805.2.1. Inma eceive these items every of	ates are p	rovided cleaning supplies daily. Or		
				ons of the jail are completed and docum	ente	d at a minimum of once monthly.
CON	1PL	IANCE		IFICATION		1
<u> </u>	<u> </u>	Meets standard		Policy and procedure manual review		Previous compliance documented
Ĺ	<u> </u>	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	<u>4</u>	Non-compliant	<u> </u>	Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
				a policy and procedure in place for t not all areas of the facililty were ins		safety and sanitation inspection of the ted in March.
				are disinfected and cleaned before reiss		
CON	1PL	IANCE	VER	IFICATION		
		Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
	j	Non-compliant		Sight confirmation by inspector		
Ī		Not reviewed		Verbal confirmation by facility staff		
Com	me	nts: Policy #604.6. The fa	cility has	a policy and procedure in place reg	ardi	ng grooming.

DOC 350.12 (15) Property storage containers shall be sanitized before reuse.					
	Property storage containers may includ				
		_	IFICATION		
		$\underline{\underline{\vee}}$	Policy and procedure manual review	_	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	-	$\underline{\underline{\lambda}}$	Sight confirmation by inspector		
L	Not reviewed	X	Verbal confirmation by facility staff		
Com	ments: Policy #805.3.1. The facility s	sa	nitizes property storage containers bef	for	e each use.
DOC	350.12 (16) Trash is removed daily from	n a	ll dayrooms.		
CON	MPLIANCE VI	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement			\overline{A}	Other (specify):
	Non-compliant	Ī	Sight confirmation by inspector		(1 7/
Ī		\overline{X}	Verbal confirmation by facility staff		
Com	ments: Policy #805.3. On the day of	in	spection, inmates stated their trash is	re	moved daily.
DOC	350.12 (17) Hazardous waste shall be d	lisp	posed of according to government regulation	ns	
CON	//PLIANCE VI	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	$\overline{1}$	Sight confirmation by inspector		()
	Not reviewed Verbal confirmation by facility staff				
Com	nments: Policy #806.				
			INMATE SERVICES		
	350.26 Grievance Process. The jail shall able to all inmates and includes at least		have policies and procedures relating to a e level of appeal.	n i	nmate grievance process and ensure it is
CON	MPLIANCE VI	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
Ī	Needs improvement	Ť	Sample of facility records reviewed	Ħ	Other (specify):
Ī	Non-compliant	Ħ	Sight confirmation by inspector		The (specify)
	Not reviewed	╡	Verbal confirmation by facility staff		
Com		pc	olicies and procedures in place regardi	ng	j inmate grievances.
	C 350.27 Legal Access. The jail shall ha	ve	policies and procedures to address inmate	es'	access to the courts, their attorneys, and
		ER	IFICATION		
		X	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	╡	Other (specify):
	Non-compliant [╡	Sight confirmation by inspector		Outor (specify).
	Not reviewed	╡	Verbal confirmation by facility staff		
Com		as	policies and procedures in place to ad	dr	ess inmates' access to courts.

DOC 350.28 Indigence. The jail shall have policies and procedures to address indigence.							
DOC 350.28 (1) The jail	DOC 350.28 (1) The jail shall establish definitions and procedures to define indigence.						
DOC 350.28 (2) Inmates	DOC 350.28 (2) Inmates' access to health care, programming and essential services is not precluded by inability to pay.						
COMPLIANCE	COMPLIANCE VERIFICATION						
Meets standar		Policy and procedure manual review	Previous compliance documented				
Needs improve	ement	Sample of facility records reviewed	Other (specify):				
Non-compliant		Sight confirmation by inspector					
Not reviewed		Verbal confirmation by facility staff					
		ocedures to address indigent inmates. services due to their inability to pay.	Inmates are not refused access to				
DOC 350.29 Mail. The jail shall have policies and procedures relating to written contact between inmates and their families, friends, attorneys, the court system, government officials and others. DOC 350.29 (1) Provision for staff inspection and reading of non-privileged incoming and outgoing mail. Staff demonstrate a working knowledge of the procedures for mail inspection. DOC 350.29 (2) Provision for the limited inspection of incoming and outgoing privileged mail.							
		of the definition of privileged mail and the proce	dures for inspecting it.				
COMPLIANCE		RIFICATION	Daniero constitue de consented				
Meets standar		, ,	Previous compliance documented				
Needs improve		Sample of facility records reviewed	Other (specify):				
Non-compliant Not reviewed		Sight confirmation by inspector Verbal confirmation by facility staff					
DOC 350.29 (3) Deliver	pecting inmate mail.	policies and procedures in place regarding approved privileged incoming mail.	ding inmate mail. Staff can articulate				
COMPLIANCE		RIFICATION					
Meets standar			Previous compliance documented				
Needs improve		Policy and procedure manual review Sample of facility records reviewed	-				
Non-compliant		Sight confirmation by inspector	Other (specify):				
Not reviewed		Verbal confirmation by facility staff					
Comments: Policy #10	12. Mail is delivered						
 Contraband iten 	ry and disposition of co as are inventoried and do comptly turned over to su						
COMPLIANCE	VEF	RIFICATION					
Meets standar	d 🖂	Policy and procedure manual review	Previous compliance documented				
Needs improve	ement	Sample of facility records reviewed	Other (specify):				
Non-compliant		Sight confirmation by inspector					
Not reviewed		Verbal confirmation by facility staff					
Comments: Policies #	012 and #219. The	facility has a policy in place to address	s contraband found in the mail.				

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.29 (5) Provision of postage to indigent inmates. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #1012.10. The facility provides postage to inmates who have been determined to be indigent. DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld. A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected. VERIFICATION **COMPLIANCE** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #1012. Inmates receive a non-delivery form when mail is confiscated, destroyed or rejected. DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation. DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted. DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times. Accommodations are made for visits to occur at times other than scheduled visiting times. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #1013. The facility has policies and procedures in place regarding visitation. Visits are done via kiosks or rented tablets on the housing units. Special visits are reviewed on a case-by-case basis. DOC 350.30 (3) Documentation of all visits through a visitor log or register. All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register. COMPLIANCE **VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Sample of facility records reviewed Needs improvement Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

DISTRIBUTION: Original - Office of Detention Facilities; Copy - Facility Administrator

Comments: Policy #1013.3.1. All visits are documented through a log or register.

Non-compliant

Not reviewed

Office	e of Detention Facilities				WISCONSIN
	-2744 (4/2015)	oh noli	cy of visitors and their possessions.		
DOC .	350.30 (4) Establishment of a sear	cn poli	cy of visitors and their possessions.		
	Personal contact visitors are subje				
•		are subj	ect to strict guidelines regarding personal iten	ns,	carry-in equipment and compliance with jail
	policies.	rections	c/ Legal visitors are required to adhere to safe	CO	rrectional practices limiting carry-in items and
	may be subject to search.	COLIOTIC	s Legal visitors are required to duriere to sale	CO	rectional practices limiting early in items and
•	Jail staff consistently apply visitati	on and	search standards to all non-jail staff.		
COMF	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: Policy #1013.4.				
	<u> </u>				
DOC :	350.30 (5) Posting of visitation pe	olicies	and procedures, including visitation sche	du	le, in a place readily accessible to visitors
and ir	nmates.				
COMF	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Т	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
一一	Non-compliant	一一	Sight confirmation by inspector		g Carlot (opcony).
一一	Not reviewed		Verbal confirmation by facility staff		
Comm	pents: Policy #1013.3.2. The vi	sitina	schedule is posted for visitors to see.		
Comm	ients. 1 oney #1013.3.2. 1116 vi	Sitting .	scriculic is posted for visitors to see.		
חחר ז	350 30 (6) Establishment of a sear	ch noli	cy for inmates before and after each visit.		
	PLIANCE	VEF	RIFICATION		
	Meets standard	$\underline{}$	Policy and procedure manual review	╚	Previous compliance documented
<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed	L	Other (specify):
$\underline{}$	Non-compliant	<u>U</u>	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: Policy #1013.10				
				_	
DOC :	350.31 Programs and services. 1	he jail	shall have policies and procedures relati	ing	to the provision of inmate programs and
servic	es.				
DOC :	350.31 (1) Use of community reso	irces. c	contract providers, and volunteers authoriz	zed	by the sheriff.
		000, 0	oni det providere, and verdineere danieri		. by
DOC 3	350.31 (2) Notification to inmates	of avail	ability, eligibility, and schedules.		
DOC 1	350 31 (3) Conducting criminal ha	ckarou	nd checks on all volunteers, community re	S01	urces and contract providers
DOC .	530.31 (3) Conducting criminal ba	-kgi oui	ind checks on all volunteers, community re	301	urces, and contract providers.
DOC 3	350.31 (4) Orientation and training	on fac	ility operations for all volunteers.		
D00	250 24 (5) Educational management	!			and the second section of the
	tment of Public Instruction.	ming to	or inmates who are under 18 years of a	ıge	consistent with the requirements of the
	PLIANCE		RIFICATION	_	1
	Meets standard	$\underline{\hspace{0.1in}}$	Policy and procedure manual review	Ļ	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	L	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\square	Verbal confirmation by facility staff		
Comm	onts. The facility has policies a	nd nr	ocedures in place regarding programs	s a	nd services. The facility does use

Comments: The facility has policies and procedures in place regarding programs and services. The facility does use voluteers to provide various services within the jail. All volunteers have background checks conducted and receive a full orientation. The facility has two designated program rooms within the facility.

DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming.						
DOC 3	50.32 (1) Identification of religious	orgai	nizations and clergy willing to conduct religi	ious services in the facility.		
DOC 3	50.32 (2) Notification to inmates of	the s	chedule of religious services available in the	e jail.		
_			_			
	·	-	cedure for assessing and responding to inmate	e requests for religious services.		
COMPL			RIFICATION			
	Meets standard		Policy and procedure manual review	Previous compliance documented		
	Needs improvement	_ <u> </u>	Sample of facility records reviewed	Other (specify):		
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
Comme	ents: Policy #1008. The facility I	nas	policies and procedures in place regard	ding religious programming.		
DOC 3	50.32 (3) Identification of religious i	items	that may be kept on an inmate's person or	in the cell.		
_	Markaina Marana and a sandha dha a	1: . : .				
•			es are consistently applied throughout the jail.			
COMPL	IANCE	VEF	RIFICATION			
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed	Other (specify):		
	Non-compliant		Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy.						
COMPLIANCE VERIFICATION						
\square	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement	Ħ	Sample of facility records reviewed	Other (specify):		
一百	Non-compliant	$\overline{\Box}$	Sight confirmation by inspector			
一百	Not reviewed	X	Verbal confirmation by facility staff			
Comme		ente	d background check is conducted on a	Il volunteers.		
DOC 3	50.32 (5) Orientation and training of	n fac	ility operations for all volunteers.			
•	Documentation of the orientation and	d volu	unteer agreement is on file.			
COMPL	LIANCE	VEF	RIFICATION			
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
	Needs improvement		Sample of facility records reviewed	Other (specify):		
	Non-compliant		Sight confirmation by inspector			
	Not reviewed Verbal confirmation by facility staff					
Comments: Policy #304.2.5. A full orientation is conducted on new volunteers, and an annual orientation is conducted afterwards.						

	744 (4/2015)	have poli	cies and procedures relating to recrea	tion		
DOC 33	0.55 Recreation. The Jan Shan	nave pon	cies and procedures relating to recreat	lion.		
DOC 35	0.33 (1) Identification of the re-	creationa	activities that are available.			
DOC 35	0.33 (2) Schedule of recreation	nal activiti	es.			
COMPL	IANCE	VER	IFICATION			
\square	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
Comme	nts: Policy #1004. The facil	ity has a	designated area for inmate recrea	ation.		
DOC 35	0.33 (3) When and where avail	able, at le	ast one hour of daily exercise and recre	eatior	n is outside the cell or outdoors.	
COMPL	IANCE	VER	IFICATION			
\square	Meets standard	\square	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comme	nts: Policy #1004.3.					
DOC 35	0.34 Publications The iail sha	Il have no	licies and procedures relating to acces	es to r	oublications	
DOC 33	10.54 Fublications. The jan sha	ii iiave po	ncies and procedures relating to acces	is to p	publications.	
DOC 35	0.34 (1) Provision of publication	ns of ger	eral interest for inmates such as book	s, nev	wspapers and magazines.	
DOC 25	(0.24 (2) Identification of multiplication	-4! 4h.	et and much libited for improtes because the	h a!u a	autant anatas a accomitor viale	
DOC 35	0.34 (2) Identification of public	สนอกร เกล	at are prohibited for inmates because the	neir c	ontent creates a security risk.	
•	Reading material restrictions are	posted o	r otherwise accessible to inmates.			
D00.05	20.04 (0) 1					
DOC 35	0.34 (3) Inspection of publicati	ons brou	ght by visitors for inmates if the jail allo	ows v	disitors to bring in reading materials.	
-	There are limitations on the volu	me of pers	sonal reading materials that can be kept ir	n the h	nousing area, and these limitations are	
	enforced consistently throughou					
•			t in by visitors are subject to search.			
COMPL		VER	IFICATION		1	
$\underline{\underline{\square}}$	Meets standard		Policy and procedure manual review	<u>_</u> _	Previous compliance documented	
_ Ц_	Needs improvement	<u> </u>	Sample of facility records reviewed	L	Other (specify):	
<u> </u>	Non-compliant	<u> </u>	Sight confirmation by inspector			
	Not reviewed Verbal confirmation by facility staff					
	•	•	cedures in place regarding access	to p	oublications. All publications are	
inspec	ted and reviewed for appro	priatene	SS.			
DOC 35	0.35 Canteen. The jail shall h	ave polic	ies and procedures for the establishme	ent ar	nd use of canteen, vending or other simila	
service	s for inmates.					
DOC 35	0.35 (1) Canteen shall be made	available	s to oligible inmates			
DOC 33	0.33 (1) Canteen Shan be made	avallable	e to engible iniliates.			
DOC 35	0.35 (2) Access to canteen ma	y be restr	icted by the facility based upon inmate	class	sification or status.	
COMPL	IANCE	VER	IFICATION			
\square	Meets standard	\square	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed	T	Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comme	nts: Policy #1006 Canteen	is provid	ded by Turn Key. Commissary is r	restri	cted by inmate classification	

				FOOD SERVICE		
DOC	35	60.11 Food Service. The jail sh	all have p	olicies and procedures relating to food	serv	ice.
DOC	` 25	in 11 (1). The iail shall provide n	utritions	and quality food for all inmates.		
DOC	35	60.11 (2) An annual menu review	w by a qu	alified nutritionist or dietician shall be o	omp	leted and maintained in the facility files.
CON	/IPL	IANCE	VER	IFICATION		
	\leq	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
con	du	cted by a registered dieticia	n. Regi	licies and procedures related to for stration was verified on the day of i	nspe	ection.
		60.11 (3) An annual inspection of the enting that the food service are		production and service kitchens in a jai ealth and safety codes.	l by a	qualified, independent outside source
CON	ЛРI	IANCE	VFR	IFICATION		
		Meets standard		Policy and procedure manual review		Previous compliance documented
Γ	\dashv	Needs improvement		Sample of facility records reviewed		Other (specify):
	┪	Non-compliant		Sight confirmation by inspector		Galler (epochy).
Ī	┪	Not reviewed	一百	Verbal confirmation by facility staff		
Com		nts: An inspection was cond	lucted b	the Pierce County Public Health I	Dens	artment on April 5, 2018
COII	IIIIE	ins. An inspection was cond	ideled b	the rierce County rubile riealth i	Debe	artifient of April 5, 2016.
DOC	35	60.11 (4) Internal monthly inspe	ction of t	he food service area is completed and o	docur	mented.
CON	/IPL	IANCE	VER	IFICATION		
	\overline{A}	Meets standard	\square	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	ıme	nts: Policy #906.3. A review	of facili	y records indicates compliance.		
DOC	: 35	in 11 (5). The kitchen area and a	all equinm	ent are maintained in a sanitary conditi	ion l	Routine inspections are completed and
		ented.	oquipii	ioni alo mamamoa in a bannai y bonais		
CON	/IPL	IANCE	VER	IFICATION		
	$\overline{\mathbf{A}}$	Meets standard		Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant	\boxtimes	Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	me	ents:				
DOC holi	35 day	50.11 (6) Three nutritious meal food service demands, provide	ls are pro ed basic r	vided daily, two of which are hot. Var	iatio	ns may be allowed based on weekend and
CON	/IPL	IANCE	VER	IFICATION		
	\langle	Meets standard		Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	ıme	ents: Policy # 900.9. The Pie	erce Cou	nty Jail provides three nutritious m	eals	, two of which are hot.
		-				

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	7-2144 (4/2013)					
DOC	350.11 (7) Food temperatures a	re properly	/ maintained.			
:	 Documentation of daily food preparation temperatures is maintained. Documentation of periodic serving temperature readings is maintained. 					
COM	PLIANCE	VER	IFICATION			
	Meets standard		Policy and procedure manual review		Previous compliance documented	
Ē	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector		7 77	
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff			
Comn	nents: A review of records in	dicates co	ompliance.			
		d. Food ite	ms are stored in appropriate locations a		ened food packages are stored in airtight emperatures.	
COM	PLIANCE	VER	IFICATION			
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comn	nents:					
•	Documentation of special diets PLIANCE	orders is m	rescribed by a qualified health care profesintained.	essic	onal.	
COMI		VER			Dravious compliance decumented	
			Policy and procedure manual review Sample of facility records reviewed		Previous compliance documented	
	Needs improvement		•		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed Verbal confirmation by facility staff					
Comn	nents: Policy #904. All speci	al diets a	re reviewed and approved by a QH	CP.		
	provide a substitute from other				Consistent with available resources, the jail The substitutions shall be consistent with	
COM	PLIANCE	VER	IFICATION			
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
	nents: Policy #1008.5. Inma opropriate substitute.	tes may a	bstain from any foods that violate t	he ir	nmate's religion. The jail will provide	

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DOC		kit	chen who prepare or serve food shall bat	he	or shower daily and be provided a clean
	350.11 (12) No person who is known food handler in a facility.	to k	e infected with any illnesses transmittable	by	food or utensils may be employed or work
hand			I service areas shall wear clean garments a handling of food, drink, utensils or equipm		
CON	MPLIANCE	VE	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Com	nments: The facility does not utilize	nm	nate workers in the kitchen.		
DOC	350.11 (14) Inmate workers are provide	led	orientation and training prior to assignmen	t in	the kitchen area.
	 Documentation of orientation and train 	nino	g is maintained.		
CON	/PLIANCE		RIFICATION		
Г	Meets standard	Ë	Policy and procedure manual review	П	Previous compliance documented
<u> </u>	Needs improvement	┢	Sample of facility records reviewed	$\frac{\square}{\square}$	Other (specify):
	Non-compliant	┢	Sight confirmation by inspector	Ш	Other (specify).
<u>L</u>	Not reviewed	┢	Verbal confirmation by facility staff		
	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
Com	ments: The facility does not utilize	nm	iate workers in the kitchen.		
DOC	350.11 (15) Inmate workers are super	vise	ed throughout all aspects of food preparation	on a	and service.
CON	/PLIANCE	VF	RIFICATION		
Г	Meets standard	T	Policy and procedure manual review	П	Previous compliance documented
-	Needs improvement	┢	Sample of facility records reviewed	一	Other (specify):
F	Non-compliant	F	Sight confirmation by inspector	<u> </u>	Other (Specify).
<u> </u>	Not reviewed	F	Verbal confirmation by facility staff		
	nments: The facility does not utilize	nm	· · · · · ·		
DOC	350.11 (16) Food and drink shall be p	rote	ected from contamination. Meals are covere	ed o	during transit to and within the facility.
CON	MPLIANCE	VE	RIFICATION		
	Meets standard	\times	Policy and procedure manual review		Previous compliance documented
Γ	Needs improvement		Sample of facility records reviewed	一	Other (specify):
	Non-compliant	X	Sight confirmation by inspector	<u> </u>	Caron (openny).
Ī	Not reviewed	X			
Com	nments: Policy #903.5. Meals are co	OVE			
DOC	350.11 (17) Kitchen food storage and	dis	hwashing equipment temperatures are rout	ine	ely monitored and documented.
	MPLIANCE		RIFICATION		•
	Meets standard	Ē	Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement	X	Sample of facility records reviewed	퓜	Other (specify):
一片	Non-compliant		Sight confirmation by inspector	<u> </u>	Caro. (opcony).
Ť	Not reviewed	F	Verbal confirmation by facility staff		

Comments:

Office of Detention Facilities DOC-2744 (4/2015)

DOC-2744 (4/2015)						
DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean.						
COMPLIANCE VERIFICATION						
Meets standard Policy and procedure manual review Previous compliance documented						
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	n-compliant Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff	Verbal confirmation by facility staff				
Comments:						
DOC 350.11 (19) Cleaning agents are stored separately from food service items.						
	VERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
Comments:						
DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times. • Documentation of daily control and inventory is maintained.						
COMPLIANCE VERIFICATION						
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant						
Not reviewed	Verbal confirmation by facility staff					
Comments: Policy #215.2. A security procedure is in place. A photo album is established so all staff can identify what items are being inventoried.						

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